## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885 or <u>Fax</u>

BERESKIN ANI 40 KING STREET BOX 401 TORONTO, ON M	T WEST A5H 3Y2	AN 1 3 2006 W	nave its own certific	of mailing can only be used a This certificate cannot be used and paper, such as an assignmate of mailing or transmission. Certificate of Mailing or Transmital is being a with sufficient postage for final Stop ISSUE FEE address SPTO (571) 273-2885, on the	smission
CANADA	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				(Depositor's name
7/2006 MDANTE2 0000	0031 10689517	THAD BURNET			(Signatur
C:2501	100000				(Date
C:1504 LICATION NO.	FILING BRIDGE UP	FIRST 1	NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/689,517	10/689,517 10/21/2003		Paul Garfield Jong		8647
APPLN. TYPE nonprovisional	SMALL ENTITY NO	ISSUE FEE \$1490 \$700	PUBLICATION FEE \$300	TOTAL FEE(S) DUE	DATE DUE 03/01/2006
EXAM	IINER	ART UNIT	CLASS-SUBCLASS		
RICCI,	JOHN A	3711	124-052000		
"Fee Address" indicate PTO/SB/1: Rev 03-02 (Number is required.  3. ASSIGNEE NAME AND	tion (or "Fee Address" Indica or more recent) attached. Use D RESIDENCE DATA TO B	tion form (2) tregit 2 regit 2 regit iste	gents OR, alternatively,  he name of a single firm (having as- stered attorney or agent) and the na gistered patent attorneys or agents. I d, no name will be printed.  TENT (print or type)  Il appear on the patent. If an assignment.	mes of up to If no name is 3	locument has been filed f
PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGN		(B) RESI	DENCE: (CITY and STATE OR CO	OUNTRY)	
(A) NAME OF ASSIGN  Please check the appropriate  4a. The following fec(s) are	EE  assignce category or categor enclosed: mall entity discount permitte	ries (will not be printed on  4b. Payme  A c  d)  Pay  Th	the patent): Individual cent of Fee(s): theck in the amount of the fee(s) is expent by credit card. Form PTO-20: The Director is hereby authorized by	Corporation or other private grenclosed.  38 is attached.  charge, the required fee(s) or	oup entity Government
(A) NAME OF ASSIGN  Please check the appropriate  4a. The following fec(s) are  Issue Fee  Publication Fee (No s  Advance Order - # of  Change in Entity Status  a. Applicant claims S	e assignee category or categorenclosed:  mall entity discount permitte f Copies  (from status indicated above MALL ENTITY status. See	db. Payme  4b. Payme  4c A c  d) Pay  The  Deposit	the patent): Individual on the patent): Individual on the fee(s): The the think the amount of the fee(s) is expressed in the amount of the fee(s) is expressed in the amount of the fee(s) is expressed in the feet of the fee	Corporation or other private grenclosed. 38 is attached. charge the required fee(s), or enclose an extra of the contract of th	oup entity Government, credit any overpayment, copy of this form).
(A) NAME OF ASSIGN  Please check the appropriate  4a. The following fec(s) are  Issue Fee  Publication Fee (No s  Advance Order - # of  Change in Entity Status  a. Applicant claims S	e assignee category or categorenclosed:  mall entity discount permitte f Copies  (from status indicated above MALL ENTITY status. See	db. Payme  4b. Payme  4c A c  d) Pay  The  Deposit	the patent): Individual cent of Fec(s):  check in the amount of the fec(s) is coment by credit card. Form PTO-20:  Director is hereby authorized by it Account Number	Corporation or other private grenclosed.  38 is attached. charge the required fec(s), or (enclose an extra continuous extra c	oup entity Government, credit any overpayment, copy of this form).
(A) NAME OF ASSIGN  Please check the appropriate  4a. The following fec(s) are  Issue Fee  Publication Fee (No s  Advance Order - # of  Change in Entity Status  a. Applicant claims S	e assignee category or categorenclosed:  mall entity discount permitte f Copies  (from status indicated above MALL ENTITY status. See	db. Payme  4b. Payme  4c A c  d) Pay  The  Deposit	the patent): Individual on the patent): Individual on the fee(s): The the think the amount of the fee(s) is expressed in the amount of the fee(s) is expressed in the amount of the fee(s) is expressed in the feet of the fee	Corporation or other private grenclosed. 38 is attached. charge the required fee(s), or enclose an extra of the contract of th	oup entity Government Government, (credit any overpayment, (copy of this form).

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.